



STATE OF MARYLAND

DMMH

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Public Health & Emergency Preparedness Bulletin: # 2008:19

Reporting for the week ending 05/10/08 (MMWR Week #19)

CURRENT HOMELAND SECURITY THREAT LEVELS

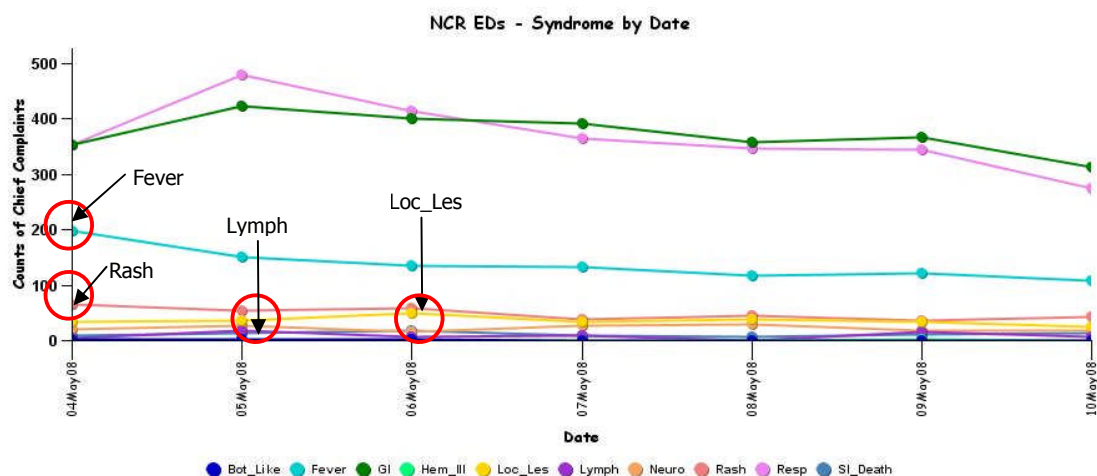
National: Yellow (ELEVATED) *The threat level in the airline sector is Orange (HIGH)
Maryland: Yellow (ELEVATED)

SYNDROMIC SURVEILLANCE REPORTS

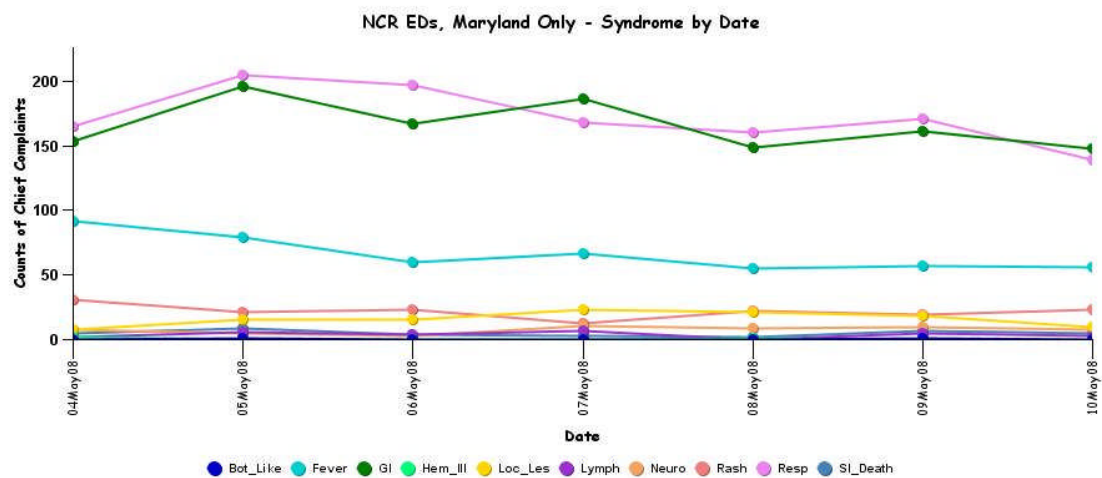
ESSENCE (Electronic Surveillance System for the Early Notification of Community-based Epidemics):

Graphical representation is provided for all syndromes, excluding the "Other" category, all age groups, and red alerts only. Note: ESSENCE – ANCR Spring 2006 (v 1.3) now uses syndrome categories consistent with CDC definitions.

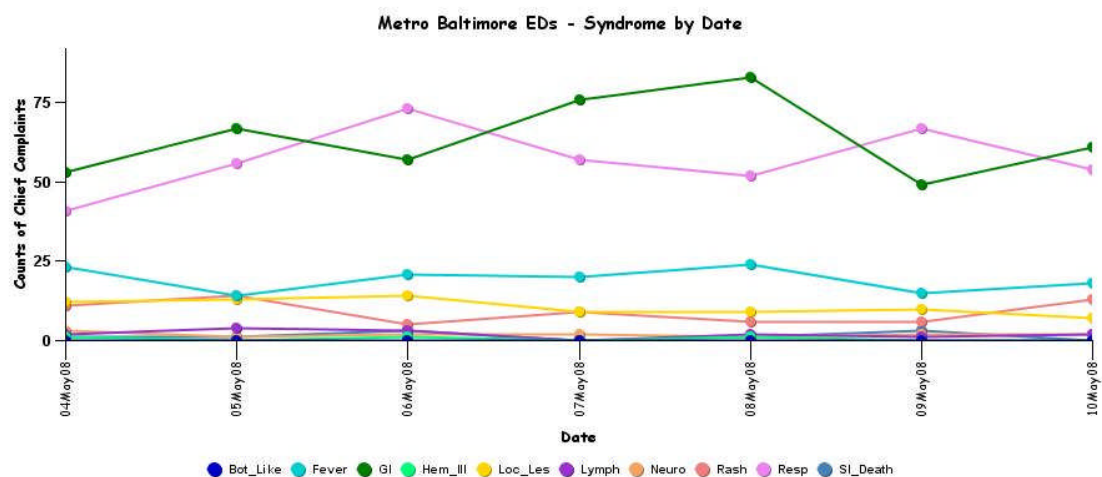
Overall, no suspicious patterns of illness were identified. Track backs to the health care facilities yielded no suspicious patterns of illness.



* Includes EDs in all jurisdictions in the NCR (MD, VA, DC) under surveillance in the ESSENCE system



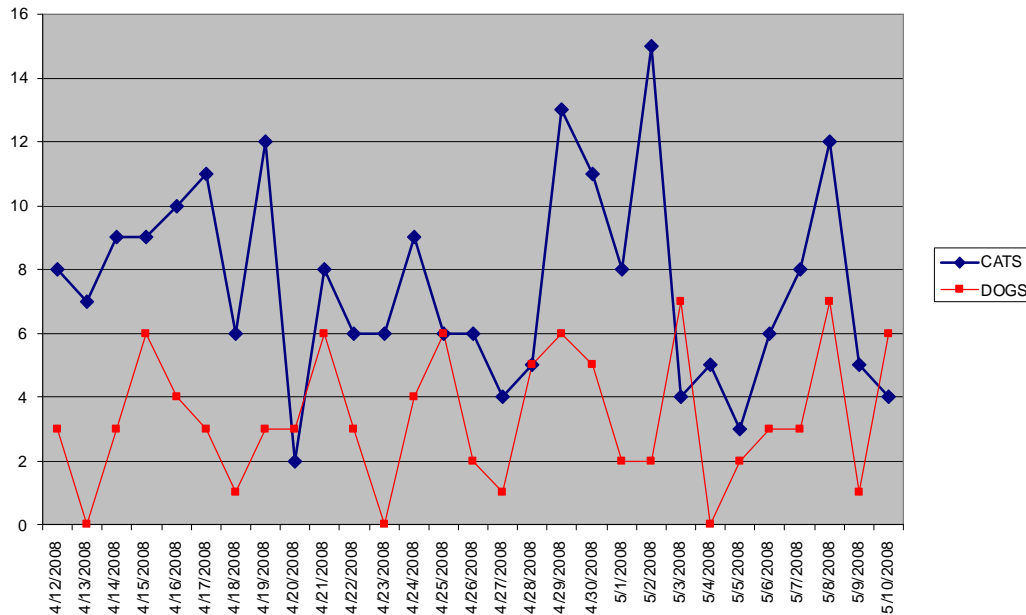
* Includes only Maryland EDs in the NCR (Prince George's and Montgomery Counties) under surveillance in the ESSENCE system



* Includes EDs in the Metro Baltimore region (Baltimore City and Baltimore County) under surveillance in the ESSENCE system.

BALTIMORE CITY SYNDROMIC SURVEILLANCE PROJECT: No suspicious patterns in the medic calls, ED Syndromic Surveillance and the animal carcass surveillance. Graphical representation is provided for animal carcass surveillance 311 data.

Dead Animal Pick-Up Calls to 311

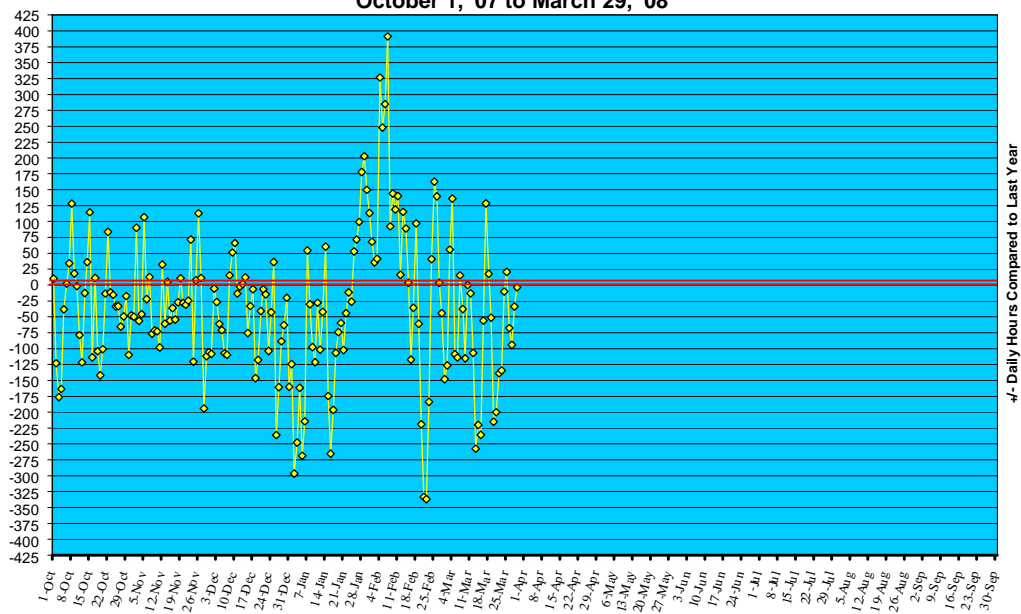


REVIEW OF EMERGENCY DEPARTMENT UTILIZATION

YELLOW ALERT TIMES (ED DIVERSION): The reporting period begins 10/01/06.

*Note: No new data available at this time.

**Statewide Yellow Alert Comparison
Daily Historical Deviations
October 1, '07 to March 29, '08**



REVIEW OF MORTALITY REPORTS

Office of the Chief Medical Examiner: OCME reports no suspicious deaths related to BT for the week.

MARYLAND TOXIDROMIC SURVEILLANCE

Poison Control Surveillance Monthly Update: Investigations of the outliers and alerts observed by the Maryland Poison Center and National Capital Poison Center in April 2008 did not identify any cases of possible terrorism events.

REVIEW OF MARYLAND DISEASE SURVEILLANCE FINDINGS

COMMUNICABLE DISEASE SURVEILLANCE CASE REPORTS (confirmed, probable and suspect):

Meningitis:	<u>Aseptic</u>	<u>Meningococcal</u>
New cases (May 4 - 10, 2008):	12	1
Prior week (Apr 27 – May 3, 2008):	11	0
Week#19, 2007 (May 5 - 11, 2007):	8	0

OUTBREAKS: 5 outbreaks were reported to DHMH during MMWR Week 19 (May 4-May 10, 2008):

2 Gastroenteritis outbreaks

2 outbreaks of GASTROENTERITIS associated with Nursing Homes

2 Foodborne Gastroenteritis outbreaks

1 outbreak of FOODBORNE GASTROENTERITIS associated with a Restaurant

1 outbreak of FOODBORNE GASTROENTERITIS associated with an Assisted Living Facility

1 other outbreak

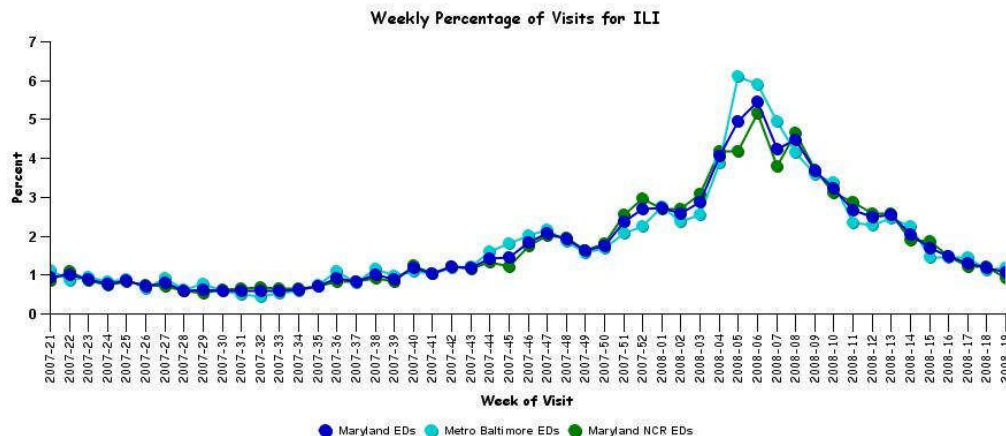
1 OTHER outbreak associated with a Hospital

MARYLAND SEASONAL FLU STATUS:

Seasonal Influenza reporting occurs October through May. **Note: No new data available at this time. As of MMWR Week 18, there had been 3638 lab confirmed influenza cases in Maryland. Maryland's influenza activity level was LOCAL.

SYNDROMIC SURVEILLANCE FOR INFLUENZA-LIKE ILLNESS:

Graph shows the percentage of total weekly Emergency Department patient chief complaints that have one or more ICD9 codes representing provider diagnoses of influenza-like illness. This graph does not represent confirmed influenza.



PANDEMIC INFLUENZA UPDATE / AVIAN INFLUENZA-RELATED REPORTS

WHO Pandemic Influenza Phase: Phase 3/4: No or very little human-to-human transmission/Small clusters with limited human-to-human transmission, suggesting that the virus is not well adapted to humans

US Pandemic Influenza Stage: Stage 0/1: New domestic animal outbreak in at-risk country/Suspected human outbreak overseas

*More information regarding WHO Pandemic Influenza Phase and US Pandemic Influenza Stage can be found at: <http://bioterrorism.dhmm.state.md.us/flu.htm>

WHO update: As of April 30, 2008, the WHO-confirmed global total of human cases of H5N1 avian influenza virus infection stands at 382, of which 241 have been fatal. Thus, the case fatality rate for human H5N1 is about 63%.

AVIAN INFLUENZA (South Korea): 04 May 2008, South Korea's quarantine service said Saturday on May 3 that a highly pathogenic strain of the bird flu virus was responsible for the sudden death of chickens at a private home in Daegu. The National Veterinary Research and Quarantine Service (NVRQS) said the H5N1 strain of the bird flu killed the 5 birds at the private home in the industrial city 302 kilometers southeast of Seoul. It said to prevent further spreading of the avian influenza, 260 chickens raised in 3 small-scale farms within a 3-km radius of the home have been culled and buried. Quarantine officials said the 5 chickens were purchased at a local open air market and are tracking where the birds came from. Earlier in the week, the government said it would ban the sale of all poultry sold at traditional markets that are open at regular intervals. The measures were taken after experts said the recent outbreaks in the southeastern Gyeongsang region were caused by people buying birds from such markets, which have largely escaped government oversight owing to their relatively small size. Authorities meanwhile said that decontamination efforts were underway within 10 km of the Daegu home with close observation being carried out on homes and small-time poultry farms within this zone. The government has been catching considerable flak for failing to contain the outbreaks, which have generally been centered around the Jeolla region in southwestern South Korea.

AVIAN INFLUENZA (South Korea): 06 May 2008, The bird flu outbreak that has swept South Korea reached the capital Seoul on Tuesday May 6 prompting quarantine officials to decontaminate and limit access to a nearby children's park and open air market. The Ministry for Food, Agriculture, Forestry and Fisheries said tests conducted on 4 birds that started dying off from late April showed they were contaminated with the H5 avian influenza virus. The bird vivarium located at the Gwangjin ward office in eastern Seoul raised 57 chickens, ducks, pheasants and turkeys. The ministry said all birds in the vivarium have been culled and buried as a precautionary measure, while detailed tests to determine if the deaths were caused by a virulent strain of the bird flu will be made known later in the day. "Interviews with the ward's workers revealed that the pheasant that died on Apr 28 was bought at a livestock market in Seongnam, south of Seoul," a quarantine official said. He added that inspectors have been dispatched to the market to check for additional contamination and to find out how the pheasant got sick. The expert said while there was little chance of the bird flu spreading in an urban environment, authorities have sealed off Children's Grand Park located 1.2 km from the vivarium and Gyeongdong market, where some live poultry transactions take place. Most of the initial bird flu cases reported this year were centered in the Jeolla region in southwestern South Korea. It has since spread through most of the country with bird deaths being reported in Gyeongsang region in the southeast and 2 cities in Gyeonggi Province south of Seoul.

AVIAN INFLUENZA (Viet Nam): 08 May 2008, Bird flu has stricken fowl flocks in Viet Nam's southern Can Tho city over the past few days, raising the total number of affected localities in the country to 3, according to Viet Nam's Department of Animal Health on Thursday May 8. The bird flu outbreak killed 1131 poultry, including 1070 chickens raised by a household in the city's Phong Dien rural district. Local veterinary forces on May 7 culled the remainders of 829 healthy fowls in the affected flocks to prevent the disease's spread. Viet Nam currently has 3 localities having poultry being hit by bird flu: northern Son La province, southern Vinh Long province and southern Can Tho city, the department said. Bird flu outbreaks in Viet Nam, starting in December 2003, have killed and led to the forced culling of dozens of millions of fowls in the country.

AVIAN INFLUENZA (India): 09 May 2008, Veterinary workers were getting ready to cull thousands of backyard poultry to contain an outbreak of bird flu in India's eastern state of West Bengal which has struggled to control the virus since January. The communist-ruled state briefly contained the outbreak by culling more than 4 million birds in 14 of its 19 districts, but the virus has intermittently resurfaced. Poultry sales in the state had fallen by about 70 percent in the January-March period, but traders said they were still struggling to overcome losses. On Friday May 9, officials said the virus has spread to the tea-growing Darjeeling district, the 15th to be hit by bird flu this year. "Tests in a central laboratory confirmed the recent poultry deaths from the H5N1 strain of the virus in Darjeeling district," Rajesh Pande, a senior government official said. Around 300 birds mysteriously died last week in Sukna area in the foothills of the Himalayas near the bustling northern town of Siliguri, he said. "The deaths are all in backyard poultry and not in any farm," Pande added. After a massive culling operation, authorities in West Bengal said in February that bird flu was under control. The World Health Organization (WHO) has described the situation in West Bengal as India's worst bird flu outbreak in poultry. Officials in West Bengal said they were looking for people with flu-like symptoms. India has so far not reported any human infections.

AVIAN INFLUENZA, SWAN (Japan): 10 May 2008, Japan has found the H5N1 strain of bird flu in another swan in the northernmost main island of Hokkaido, the prefectural government of Hokkaido said on its website on Saturday May 10. The case was confirmed from a dead swan found 5 days ago near Lake Saroma in eastern Hokkaido. On the same day, local authorities had said the same strain of bird flu was found in another swan found dead on Apr 24 in another area of the island. The latest case is the third in Japan this year. In late April, several swans were found with the H5N1 strain on the shores of Lake Towada, close to the northern tip of the main island of Honshu. The livestock hygiene service centre will issue an order for chicken farms within a 30-km radius to disinfect poultry houses, Kyodo news agency said. No human deaths from the disease have been reported in Japan.

NATIONAL DISEASE REPORTS:

PLAGUE, PRAIRIE DOGS, SUSPECTED (Colorado): 06 May 2008, A population of prairie dogs inhabiting the Valmont Butte site could have the plague, according to Boulder County Public Health officials. Signs were posted on May 2 at the site, warning people to stay away from the critters as the county investigates. Officials say the population of the rodents has declined sharply in recent months, a sign of possible disease. Flea samples being collected this weekend (May 3 and 4) will be tested for plague. Results are expected within 2 weeks. The city was preparing to relocate the prairie dogs after discovering the animals have dug through soil caps meant to protect wildlife and people from 2 toxic tailing ponds on the butte. The city had anticipated that the population would have increased by as much as 60 percent since last year; however their numbers have dropped by about 75 percent. Until the test results are announced, the city will postpone any plans to relocate prairie dogs or continue with any remediation work. Plague is an infectious disease that can be transmitted to humans by the bites of infected fleas or by direct contact with infected animals. (Plague is listed in Category A on the CDC list of Critical Biological Agents) *Non-suspect case

INTERNATIONAL DISEASE REPORTS:

CHIKUNGUNYA (Indonesia): 05 May 2008, Chikungunya virus has infected a total of 473 people in Sukoharjo District, during the first 4 months of 2008, Agus Prihatmo of the Sukoharjo health service said. "During the January-March 2008 period, some 314 residents were infected with chikungunya virus, and the number increased by 159 in April alone," he said. The chikungunya cases were found in 27 villages located in 9 subdistricts, he said. Gatak Subdistrict has the largest number of cases with 37 chikungunya patients. The villages would continue to be prone to the disease during the current La Nina-induced rainy season expected to end in June, he said. He urged the local residents to intensify the eradication of mosquito-breeding grounds. Chikungunya, like dengue fever, is spread by *Aedes aegypti* mosquitoes and is characterized by an extremely high fever. But the symptoms are different from dengue because they include severe joint pain that could last up to a week, but sometimes up to 6 months and even more. (Emerging Infectious Diseases are listed in Category C on the CDC list of Critical Biological Agents) *Non-suspect case

CHIKUNGUNYA (Singapore): 08 May 2008, Singapore's Health Ministry confirmed the 17th case of the mosquito-borne chikungunya disease here on Thursday May 8. The ministry revealed that the latest victim was a man, among the 4 new cases that caught the disease overseas recently. He believed he caught the virus while playing golf at Jakarta's Jagorawi Golf and Country Club a month ago. His infectious period is now over. Since the first locally-transmitted case was detected on Jan 14, so far 13 people have been infected locally, while another 4 caught the virus overseas, the ministry said. Its spokesman said: "The virus can be carried into Singapore, and the presence of the *Aedes* mosquito means the threat will remain." Currently, there is no vaccine to prevent chikungunya fever, which is characterized by fever, joint pains, chills and nausea. The ministry said the best way to prevent chikungunya fever is to take precautionary measures to prevent mosquito breeding around the house and to protect oneself against mosquito bites. (Emerging Infectious Diseases are listed in Category C on the CDC list of Critical Biological Agents) *Non-suspect case

CHIKUNGUNYA (India): 08 May 2008, A suspected outbreak of chikungunya was reported from Kasargod district in Kerala on Thursday May 8. The cases were reported from Panathadi village, about 70 km from Kasargod district headquarters. The village borders Karnataka. A health official at the district medical office said that about 130 suspected cases of chikungunya were reported from the village. "The patients complained of fever and joint pain. We have sent some blood samples to the virology institute at Alleppey in Kerala," he said. The health department is carrying out intensive mosquito eradication work in the affected area. Last year, some of the southern districts in Kerala witnessed an outbreak of chikungunya. (Emerging Infectious Diseases are listed in Category C on the CDC list of Critical Biological Agents) *Non-suspect case

BOTULISM (Russia): 08 May 2008, The Press service of Tolyatti Municipality notified the Correspondent of IA Regnum VolgaInform that 2 cases of botulism were reported during the first quarter of 2008. All the cases were due to consumption of homemade mushrooms or fish. Five cases of botulism with 7 affected people have been registered during 2007. For 4 of the cases, the source of infection was homemade canned fish and for 3 homemade dried fish. (Botulism is listed in Category A on the CDC list of Critical Biological Agents) *Non-suspect case

ANTHRAX, HUMAN, BOVINE (Peru): 08 May 2008, On Apr 23 the Lima District Health Unit (DIRESA) notified the General Directorate for Epidemiology of 3 confirmed cases of cutaneous anthrax from the Caudevilla locality, Supe District. On Apr 21, the staff of the Supe Hospital in conjunction with the SENASA (State Animal Health) veterinarian investigated and located the clandestine slaughter facility where the exposure occurred and vaccinated the 7 cattle and 11 sheep found there; the owner said that the cow had been ill for 3 days before slaughter and had been bought recently and with unknown vaccinal status in Huaura province; the meat had been distributed in the community and part had gone to a shop in Supe; the 3 patients remain in the Supe hospital and have responded favorably to free antibiotic treatment. The following measures were to be applied: implementation of an epidemiological anthrax alert in the Barranca area reporting the current situation, clinical characteristics, and management of anthrax cases; investigation and identification of exposed persons who participated in the clandestine butchering of the animal suspected of having anthrax; follow up of contacts for identification and prompt management of cases; dissemination of preventive measures among the public. This outbreak is associated with the clandestine slaughter of a sick bovine. There is risk of additional cases since the number of persons exposed to the contaminated meat and hide that were commercialized is not known. (Anthrax is listed in Category A on the CDC list of Critical Biological Agents) *Non-suspect case

CRIMEAN-CONGO HEMORRHAGIC FEVER (Turkey): 08 May 2008, On Monday May 5, 3 more people died from Crimean-Congo hemorrhagic fever (CCHF) in Turkey, raising the death toll to 5 in the past week. In Samsun province 2 people died from CCHF and another 4 with similar symptoms have been in medical care. A 57-year old man was bitten by a tick 3 weeks ago and died at the Ankara Education and Research Hospital. His family said they had taken him to a hospital a few days after the tick bite, which occurred in the garden of their home in the village of Kirecoca in Corum province. In the central Anatolian city of Sivas 6 children were placed under observation on suspicion of CCHF. Health authorities said a warmer climate, which Turkey has experienced in recent years, could mean a larger tick population that could in turn infect more people with the disease. (Viral hemorrhagic fevers are listed in Category A on the CDC list of Critical Biological Agents) *Non-suspect case

OTHER RESOURCES AND ARTICLES OF INTEREST:

More information concerning Public Health and Emergency Preparedness can be found at the Office of Preparedness and Response website: <http://bioterrorism.dhmm.state.md.us/>

Investigation of Outbreak of Infections Caused by Salmonella Agona

Updated information from CDC on an outbreak of Salmonella Agona infections associated with puffed rice and puffed wheat cereals. As of May 13, the outbreak has increased to 28 cases in 15 states.
(<http://www.cdc.gov/salmonella/agona/>)

NOTE: This weekly review is a compilation of data from various surveillance systems, interpreted with a focus on a potential BT event. It is not meant to be inclusive of all epidemiology data available, nor is it meant to imply that every activity reported is a definitive BT event. International reports of outbreaks due to organisms on the CDC Critical Biological Agent list will also be reported. While not "secure", please handle this information in a professional manner. Please feel free to distribute within your organization, as you feel appropriate, to other professional staff involved in emergency preparedness and infection control.

For questions about the content of this review or if you have received this and do not wish to receive these weekly notices, please e-mail me. If you have information that is pertinent to this notification process, please send it to me to be included in the routine report.

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